

# Best Available Copy

Dec. 4. 2006 2:25PM 4402567453  
23-JUN-2006 18:53 FROM:MIRAMAR LIMITED

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No.1818 P. 2  
TO:006189481470> P.1

PTO/5B/01 (08-03)  
Approved for use through 07/31/2008, OMB 0531-0002  
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|                                                                                                                                                                                            |                                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b><br>(37 CFR 1.63)                                                                                                               |                                                                                                                       |
| <input type="checkbox"/> Declaration Submitted With Initial Filing                                                                                                                         | <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) |
| Attorney Document Number: 6267<br>First Named Inventor: John Graham GIBLIN<br>COMPLETE IF KNOWN<br>Application Number: 10/567,519<br>Filing Date: 02/07/2006<br>An Unit:<br>Examiner Name: |                                                                                                                       |

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ADJUSTABLE SKEWER GRIPPING DEVICE**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 04/29/2005 as United States Application Number or PCT International Application Number PCT/AU2005/000802 and was amended on (MM/DD/YYYY) 02/07/2006 (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country   | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     |                          | Certified Copy Attached? |                                     |
|-------------------------------------|-----------|----------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|
|                                     |           |                                  | Yes                      | No                       | Yes                      | No                                  |
| 2004902258                          | AUSTRALIA | 04/30/2004                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| PCT/AU2005/000802                   |           | 04/29/2005                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                     |           |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|                                     |           |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/5B/02B attached hereto.

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any comments on the impact of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES ON COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TD:80616946147E No. 1818 P.6P. 3

PTO/GB/01 (08-02)  
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## DECLARATION — Utility or Design Patent Application

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            |                                                                               |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------------------------------------------------------------------------|--------------------------|
| Direct all correspondence to <input type="checkbox"/> Customer Number: <input type="text"/>                                                                                                                                                                                                                                                                                                                                                                               |                            | OR <input checked="" type="checkbox"/> Correspondence address below           |                          |
| Name<br>WOODLING, KROST AND RUST (KENNETH L MITCHELL)                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                                               |                          |
| Address<br>8213 CHILLOOTIME ROAD                                                                                                                                                                                                                                                                                                                                                                                                                                          |                            |                                                                               |                          |
| City<br>KIRTI AND                                                                                                                                                                                                                                                                                                                                                                                                                                                         | State<br>OHIO              | ZIP<br>44004                                                                  |                          |
| Country<br>USA                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Telephone<br>440-256-4150  | Fax<br>440-256-7453                                                           |                          |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. |                            |                                                                               |                          |
| NAME OF SOLE OR FIRST INVENTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                          |
| Given Name<br>(first and middle (if any)) John Graham                                                                                                                                                                                                                                                                                                                                                                                                                     |                            | Family Name<br>or Surname GIBLIN                                              |                          |
| Inventor's Signature<br>                                                                                                                                                                                                                                                                                                                                                               |                            | Date<br>23/06/06                                                              |                          |
| Residence: City<br>OCEAN REEF                                                                                                                                                                                                                                                                                                                                                                                                                                             | State<br>WESTERN AUSTRALIA | Country<br>AUSTRALIA                                                          | Citizenship<br>AUSTRALIA |
| Mailing Address<br>19 CROWTHER ELBOW                                                                                                                                                                                                                                                                                                                                                                                                                                      |                            |                                                                               |                          |
| City<br>OCEAN REEF                                                                                                                                                                                                                                                                                                                                                                                                                                                        | State<br>WESTERN AUSTRALIA | ZIP<br>8027                                                                   | Country<br>AUSTRALIA     |
| NAME OF SECOND INVENTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                            | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                          |
| Given Name<br>(first and middle (if any)) Scott John                                                                                                                                                                                                                                                                                                                                                                                                                      |                            | Family Name<br>or Surname KANTKE                                              |                          |
| Inventor's Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                            | Date                                                                          |                          |
| Residence: City<br>MORLEY                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State<br>WESTERN AUSTRALIA | Country<br>AUSTRALIA                                                          | Citizenship<br>AUSTRALIA |
| Mailing Address<br>5 ARALUEN ST                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            |                                                                               |                          |
| City<br>MORLEY                                                                                                                                                                                                                                                                                                                                                                                                                                                            | State<br>WESTERN AUSTRALIA | ZIP<br>6062                                                                   | Country<br>AUSTRALIA     |
| <input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/GB/07A or 02LR attached hereto.                                                                                                                                                                                                                                                                                                                  |                            |                                                                               |                          |

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No.1818 P. 4

PTO/SB/01 (06-03)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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## DECLARATION — Utility or Design Patent Application

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                            |  |                                                                               |  |
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| Name<br>WOODLING, KROST AND RUST (KENNETH L. MITCHELL)                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                            |  |                                                                               |  |
| Address<br>9213 CHILLICOTHE ROAD                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                            |  |                                                                               |  |
| City<br>KIRTLAND                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | State<br>OHIO              |  | ZIP<br>44094                                                                  |  |
| Country<br>USA                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Telephone<br>440-256-4150  |  | Fax<br>440-256-7453                                                           |  |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. |  |                            |  |                                                                               |  |
| NAME OF SOLE OR FIRST INVENTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                            |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |
| Given Name<br>(first and middle (if any))                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | John Graham                |  | Family Name<br>or Surname GIBLIN                                              |  |
| Inventor's Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                            |  | Date                                                                          |  |
| Residence: City<br>OCEAN REEF                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | State<br>WESTERN AUSTRALIA |  | Country<br>AUSTRALIA                                                          |  |
| Citizenship<br>AUSTRALIA                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                            |  |                                                                               |  |
| Mailing Address<br>19 CROWTHER ELBOW                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                            |  |                                                                               |  |
| City<br>OCEAN REEF                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | State<br>WESTERN AUSTRALIA |  | ZIP<br>6027                                                                   |  |
| Country<br>AUSTRALIA                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                            |  |                                                                               |  |
| NAME OF SECOND INVENTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                            |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |
| Given Name<br>(first and middle (if any))                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Scott John                 |  | Family Name<br>or Surname HANTKE                                              |  |
| Inventor's Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                            |  | Date                                                                          |  |
| Residence: City<br>MORLEY                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | State<br>WESTERN AUSTRALIA |  | Country<br>AUSTRALIA                                                          |  |
| Citizenship<br>AUSTRALIA                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                            |  |                                                                               |  |
| Mailing Address<br>5 ARALUEN ST                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                            |  |                                                                               |  |
| City<br>MORLEY                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | State<br>WESTERN AUSTRALIA |  | ZIP<br>6062                                                                   |  |
| Country<br>AUSTRALIA                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                            |  |                                                                               |  |
| <input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02-LR attached hereto.                                                                                                                                                                                                                                                                                                                 |  |                            |  |                                                                               |  |

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No.1818. P. 5

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Title: **ADJUSTABLE SKEWER GRIPPING DEVICE**

Filed: February 7, 2006

Serial No.: 10/567,519

Inventors: John Graham GIBLIN  
Scott John HANTKE

Woodling, Krost and Rust  
9213 Chillicothe Rd.  
Kirtland, OH 44094

May 9, 2006

COMMISSIONER OF PATENTS  
P. O. Box 1450  
Alexandria, Virginia 22313-1450

### DESIGNATION OF DOMESTIC REPRESENTATIVE

We, John Graham GIBLIN and Scott John HANTKE, do hereby state that: John Graham GIBLIN and Scott John HANTKE are the owners of a patent application entitled ADJUSTABLE SKEWER GRIPPING DEVICE which was filed in United States Patent and Trademark Office on February 7, 2006; that we are authorized to make this designation as an inventor/owner of a patent application entitled ADJUSTABLE SKEWER GRIPPING DEVICE which was filed in United States Patent and Trademark

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No.1818 P. 6

Office on February 7, 2006 ; and, that, we hereby designate the following as Domestic Representative:

Kenneth L. Mitchell, Reg. No. 36,873  
Charles R. Rust, Reg. No. 18,716  
Karl V. Kurple, Reg. No. 57,440  
Woodling, Krost & Rust  
9213 Chillicothe Rd.  
Kirtland, OH 44094  
(440) 246-4150 phone  
(440) 256-7453 fax

Respectfully submitted,

Date 1-12-06

 Signature

SCOTT JOHN HANIKER Print Name

Date \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

8297-6201.epd

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23-Jul Dec. 4. 2006 2:26PM RMR4402567453

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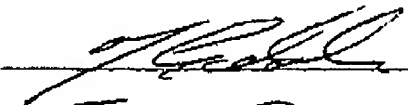
TO: 0061894814705 No. 18182.4 P. 7

Office on February 7, 2006 ; and, that, we hereby designate the following as Domestic Representative:

Kenneth L. Mitchell, Reg. No. 36,873  
Charles R. Rust, Reg. No. 18,716  
Karl V. Kurple, Reg. No. 57,440  
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(440) 246-4150 phone  
(440) 256-7453 fax

Respectfully submitted,

Date 23/06/06

  
\_\_\_\_\_  
JOHN G. R. W. Print Name

Signature

Print Name

Date \_\_\_\_\_

Signature

Print Name

0291-4000 mod